# Human Resources (413) 259-3009 humanresources@amherstma.gov

#### OPEN ENROLLMENT NOTICE

Open Enrollment Period: April 1, 2021 – April 16, 2021

During the 2021 Open Enrollment period, all eligible employees may enroll or make changes to their Health, Dental or Vision plans. All Health, Dental, and Vision enrollments or changes made during the 2021 Open Enrollment period will be effective July 1, 2021. Information on Health, Dental, and Vision Benefits-can be found throughout the Open Enrollment period on our online portal at: www.amherstma.gov/openenrollment

Additionally, between April 1 and May 31st, 2021 employees are able to enroll or make changes to a Flexible Spending Account (FSA). FSA enrollment and Changes will be effective from July, 2021 – June 30, 2022. Information on FSA Benefits can also be found at <a href="https://www.amherstma.gov/openenrollment">www.amherstma.gov/openenrollment</a>.

#### **Health Insurance:**

The Towns of Amherst and Pelham plus the Amherst Pelham Regional School District will be continuing its relationship with MIIA's Blue Cross Blue Shield program. MIIA is pleased to announce that there will be only a slight increase to premiums of 1.1% effective 7/1/2021 (see below for rate summary). There are **NO** changes in our plan design. Employees currently enrolled in the MIIA BCBS Health Plan, will automatically be renewed. No further action is required. If you would like to enroll in MIIA's Health Plan or add/drop a dependent or opt out of the plan completely, you must complete a change form found here. The Summary of Benefits can be found HERE.

## **Save Money on Health Insurance:**

Think about making the switch. Did you know that 98% of PPO subscribers are using HMO network doctors, facilities and pharmacies? This means PPO subscribers are paying more money than HMO subscribers for the same access to medical care. Open Enrollment is the time you can make changes to your plan. It could save you up to **\$201 per month** on family plans.

 Note if your need coverage for dependents that live outside of the New England states, or you want to use doctors that are NOT in the <u>BCBS network</u>, you must be enrolled in the PPO plan.

#### **Opt-Out Program:**

The employers of the Town of Amherst, Amherst Public Schools, and Amherst Pelham Regional Schools will pay a set amount of \$1,500 per year for an individual and \$3,000 per year for a family plan to active employees who opt out of the Employer sponsored health insurance plan. To be eligible you must be:

- Enrolled in a health insurance plan through the Amherst Pelham Health Trust (APHCT)
- Complete an Opt-Out form
- Enroll in health insurance elsewhere that is not another APHCT employer (through a spouse) or a government program such as the Health Connector or Mass. Health.

You can enroll in the Opt-Out Program at any time of the year as long as there is a qualifying event. Click <a href="here">here</a> for plan details. Town of Pelham municipal employees should consult with the Pelham Select Board office regarding their opt-out program.

### **Dental Insurance:**

There are no plan or premium changes to the BCBS Dental Blue Freedom. If you are currently enrolled in the BCBS Blue Freedom no action is required for continued coverage. However, if you would like to add or add/drop a dependent or opt out of the plan completely, you must complete a change <u>form</u>. The Summary of Benefits can be found <u>here</u>.

## **BCBS Vision Insurance:**

The vision plan will continue with BCBS, with no changes in plan or premium. To enroll you must complete

#### Section 125 Flexible Spending Account (FSA):

Sentinel Benefits allow you to deduct from bi-weekly pay tax free up to \$2,750/tax year to spend on predicted out-of-pocket medical expenses and/or up to \$5,000 for dependent care expenses. This program comes with a debit card. There is a yearly fee of \$42. To view the plan summary, visit their website at:

www.sentinelgroup.com. Open Enrollment for this plan will be held between April 1 and May 31, 2021 with a July 1, 2021 effective date. For more details on enrolling click here.

## Retiring Soon?

For those of you planning your retirement, our group requires enrollment in our health insurance plan at the time of your retirement in order for coverage to be continued into your retirement. If you are presently covered by your spouse's health insurance but will need health insurance for your retirement, you should enroll during our open enrollment period prior to your retirement. In addition, a reminder for those nearing the age 65 – if eligible, you and/or your spouse should sign up for Medicare Part A while you are an active employee; you should defer your enrollment in Medicare Part B and then enroll when you retire (to prevent any late enrollment penalties). Massachusetts law requires that, if you are eligible for free Medicare Part A, you must sign up for Medicare Part B. Additionally, the APHCT now participates in a Post 65 program that requires enrollment in Medicare by all retirees; if you are not eligible for free Part A, the employer is required to pay that premium.

| Coverage Premium Rate Schedule               |                   |            |                |                   |            |               |          |
|--|-------------------|------------|----------------|-------------------|------------|---------------|----------|
| Effective July 1, 2021                       |                   |            |                |                   |            |               |          |
| HEALTH PLAN                                  |                   |            |                |                   |            |               |          |
|  | PPO Plan          |            |                | HMO Plan          |            |               |          |
|  | <u>Individual</u> |            | Famil <u>y</u> | <u>Individual</u> |            | <u>Family</u> |          |
| BCBS Health Plans Total Monthly Premium      | \$ 875.           | 45         | \$2,093.76     | \$                | 674.09     | \$            | 1,612.17 |
| EMPLOYER monthly Contribution                | \$ 656.           | 59         | \$1,570.32     | \$                | 539.27     | \$            | 1,289.73 |
| EMPLOYEE/RETIREE monthly Contribution        | \$ 218.           | 36         | \$ 523.44      | \$                | 134.82     | \$            | 322.44   |
| Employee Payroll deduction /twice per month: | \$ 109.           | 43         | \$ 261.72      | \$                | 67.41      | \$            | 161.22   |
|  |                   |            |                |                   |            |               |          |
| DENTAL PLAN                                  |                   |            |                |                   |            |               |          |
| BCBS Dental                                  |                   |            |                |                   | Individual |               | Family   |
| Dental Monthly Premium                       |                   |            |                | \$                | 47.66      | \$            | 120.40   |
| Biweekly Payroll Deduction                   |                   |            |                | \$                | 23.83      | \$            | 60.20    |
|  |                   |            |                |                   |            |               |          |
| VISION PLAN                                  |                   |            |                |                   |            |               |          |
| DODO Vision Income                           |                   | Employee E |                | Employee+         |            |               |          |
| BCBS Vision Insurance                        | Employ            | ee         | +Spouse        |                   |            |               | Family   |
| Once monthly payroll deduction:              |                   |            | \$ 9.76        | \$                | 10.05      | \$            | 15.78    |

<u>Other Information/Notices:</u> Please use the following <u>link</u> to review the BCBS e-kit which contains all <u>Summary Plan Descriptions</u> as well as the 2021 Open Enrollment Notices including: <u>CHIPRA, and Patient Protection Disclosures.</u>

All employees eligible for benefits, including those who have previously waived health or dental insurance may enroll during the open enrollment period. **Open enrollment will be from Thursday April 1 until Friday, April 16<sup>th</sup>, 2021**. All changes will be effective July 1, 2021. To make any changes (adds/drops/changes), please contact Joanne Misiaszek in the Town of Amherst HR Department at (413) 259-3003, <a href="misiaszeki@amherstma.gov">misiaszeki@amherstma.gov</a> OR ARPS HR Office at <a href="misiaszeki@amherstma.gov">humanresources@arps.org</a>